

09/813 759

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)							SERIAL NO. 09813759	FILING DATE
							APPLICANT(S)	
3/7/03 11/7/03 CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/		/		/			
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TOTAL IND.	3	0	3	0	3	0		
TOTAL DEP.	8	0	8	0	11	0		
TOTAL CLAIMS	11		11		14			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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